

## 102ND GENERAL ASSEMBLY State of Illinois 2021 and 2022 HB3493

Introduced 2/22/2021, by Rep. Delia C. Ramirez

## SYNOPSIS AS INTRODUCED:

305 ILCS 5/12-4.35

Amends the Illinois Public Aid Code. Provides that the Department of Healthcare and Family Services may provide medical services to noncitizens 19 years of age through 64 years of age who (i) are not eligible for medical assistance under the Medical Assistance Program due to their not meeting the citizenship requirements under the Code and (ii) have income at or below 133% of the federal poverty level plus 5% for the applicable family size as determined under applicable federal law and regulations. Provides that persons eligible for medical services under the amendatory Act shall receive benefits identical to the benefits provided under the Health Benefits Service Package as defined under the Medical Assistance Article of the Code.

LRB102 17006 KTG 22428 b

FISCAL NOTE ACT MAY APPLY

1 AN ACT concerning public aid.

## Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- Section 5. The Illinois Public Aid Code is amended by changing Section 12-4.35 as follows:
- 6 (305 ILCS 5/12-4.35)
- 7 Sec. 12-4.35. Medical services for certain noncitizens.
- (a) Notwithstanding Section 1-11 of this Code or Section 8 9 20(a) of the Children's Health Insurance Program Act, the Department of Healthcare and Family Services may provide 10 medical services to noncitizens who have not yet attained 19 11 years of age and who are not eligible for medical assistance 12 under Article V of this Code or under the Children's Health 13 14 Insurance Program created by the Children's Health Insurance Program Act due to their not meeting the otherwise applicable 15 16 provisions of Section 1-11 of this Code or Section 20(a) of the 17 Children's Health Insurance Program Act. The medical services available, standards for eligibility, and other conditions of 18 19 participation under this Section shall be established by rule by the Department; however, any such rule shall be at least as 20 21 restrictive as the rules for medical assistance under Article 22 V of this Code or the Children's Health Insurance Program created by the Children's Health Insurance Program Act. 2.3

(a-5) Notwithstanding Section 1-11 of this Code, the Department of Healthcare and Family Services may provide medical assistance in accordance with Article V of this Code to noncitizens over the age of 65 years of age who are not eligible for medical assistance under Article V of this Code due to their not meeting the otherwise applicable provisions of Section 1-11 of this Code, whose income is at or below 100% of the federal poverty level after deducting the costs of medical or other remedial care, and who would otherwise meet the eligibility requirements in Section 5-2 of this Code. The medical services available, standards for eligibility, and other conditions of participation under this Section shall be established by rule by the Department; however, any such rule shall be at least as restrictive as the rules for medical assistance under Article V of this Code.

Department of Healthcare and Family Services may provide medical services to noncitizens 19 years of age through 64 years of age who (i) are not eliqible for medical assistance under Article V of this Code due to their not meeting the otherwise applicable provisions of Section 1-11 of this Code and (ii) have income at or below 133% of the federal poverty level plus 5% for the applicable family size as determined under applicable federal law and regulations. Persons eliqible for medical services under this amendatory Act of the 102nd General Assembly shall receive benefits identical to the

- benefits provided under the Health Benefits Service Package as
- 2 that term is defined in subsection (m) of Section 5-1.1 of this
- 3 Code.
- 4 (b) The Department is authorized to take any action,
- 5 including without limitation cessation or limitation of
- 6 enrollment, reduction of available medical services, and
- 7 changing standards for eligibility, that is deemed necessary
- 8 by the Department during a State fiscal year to assure that
- 9 payments under this Section do not exceed available funds.
- 10 (c) Continued enrollment of individuals into the program
- 11 created under subsection (a) of this Section in any fiscal
- 12 year is contingent upon continued enrollment of individuals
- into the Children's Health Insurance Program during that
- 14 fiscal year.
- 15 (d) (Blank).
- 16 (Source: P.A. 101-636, eff. 6-10-20.)